

## DO/10 WORKSHEET

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## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

<input type="checkbox"/> International Application	<input type="checkbox"/> Request form PCT/RO/101
<input type="checkbox"/> Article 19 Amendments	<input checked="" type="checkbox"/> PCT/ISA/210 - Search Report
<input type="checkbox"/> PCT/IB/331	<input type="checkbox"/> Search Report References
<input type="checkbox"/> PCT/IPEA/409 IPER (PCT/IPEA/416 on front)	<input type="checkbox"/> PCT/IB/306 - Notification of a Change
<input type="checkbox"/> Annexes to 409 (Article 34 Amendment)	<input type="checkbox"/> Other: _____
<input checked="" type="checkbox"/> Priority Document (s) No. <u>2</u>	

## RECEIPTS FROM THE APPLICANT:

<input checked="" type="checkbox"/> Basic National Fee (or authorization to charge)	<input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on: 1. _____ 2. _____ 3. _____
<input type="checkbox"/> Description	<input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on: 1. _____ 2. _____ 3. _____
<input type="checkbox"/> Claims	<input type="checkbox"/> Assignment Document (forwarded to Assignment Branch)
<input type="checkbox"/> Drawing Figure(s) - (# of dwgs. <u>15</u> )	<input type="checkbox"/> Assignee PG Publication Notice
<input type="checkbox"/> Translation of Article 19 Amendments	<input type="checkbox"/> Substitute Specification Filed on: _____
<input type="checkbox"/> entered <input type="checkbox"/> not entered:	<input type="checkbox"/> Certified Search Statement Filed on: _____
OR one page for each substitution OR replaced by Article 34 amendment	
<input type="checkbox"/> Translation of Annexes to 409	<input type="checkbox"/> Oath/ Declaration (executed)
<input type="checkbox"/> entered <input type="checkbox"/> not entered:	<input type="checkbox"/> <input checked="" type="checkbox"/> was paid at the time of filing
OR one page for each substitution OR others: _____	
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence List
<input type="checkbox"/> Power of Attorney <input type="checkbox"/> Change of Address	<input type="checkbox"/> Other: 1. _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: 2. _____

NOTES:  I.A.  Specification  Other: \_\_\_\_\_

35 U.S.C. 371 - Receipt of Request

08 Apr 01

Date Acceptable Oath/ Declaration Received

Date of Completion of requirements under 35 U.S.C. 371(c)(1), (c)(2) and (c)(4)

Date of Completion of ALL requirements under 35 U.S.C. 371.

Date of Completion of DO/EO 503 - Notification of Acceptance

Date of Completion of DO/EO 905 - Notification of Missing Requirements

Date of Completion of DO/EO 516 - Notification of Defective Response

Date of Completion of DO/EO 909 - Notification of Abandonment

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